	PATENT A	PPLICATIO Effecti	RD	Application or Docket Number								
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL TYPE	SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			15				RAT	E	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 355.00		OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ / minus 20=		. 5		X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		· Ø		X40=			OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT				+135=			OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TOTAL			OR	TOTAL	7/0
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \										Jon	OTHER	
12	16/04	(Column 1)		(Colu	mn 2)) (Column 3) SM		\LL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE ₂	
	Total	. 17	Minus	· 2	0	= /	X\$	9=		OR	X\$18=	
	Independent	• /	Minus	***	3	= /	X40)=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+13	<u>{</u>	1	OR	+270=	
						1		OTAL		1	TOTAL	
(Column 1) (Column 2) (Column 3)								FEE		OR	ADDIT. FEE	<u></u>
		CLAIMS	1 1	HIG	HEST			-	ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	, A .	PREV	MBER HOUSLY FOR	PRESENT EXTRA	RA	ΓE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		a	X\$	9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CL AINA	-	X4	0=		OR	X80=	
<u> </u>	rino: Prigod	NIATION OF MI	OLIPEE DEP	ENDEN	CLAIM		+13	5=		OR	+270=	
	•						ADDIT.	OTAL FEE		OR	TOTAL ADDIT, FEE	
		(Column:1)			ımn 2)	(Column 3)	•					
AMENDMENT C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CLAIMS REMAINING AFTER AMENDMENT	5 N. S.	NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$	9=		OR	X\$18=	
ME	Independent	•	Minus	***	41323	=	X4)=		OR	X80=	1
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							E .	1	1		
	if the entry in colu	mn 1 is less than t	he entry in colu	mn 2, wri	te "0" in co	olumn 3.	+13		<u> </u>	OR	+270=	
**	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											